## **Retail Food Inspection Report**

Floyd County Health Department Telephone (812) 948-4726

Owner 83 SUBS, LLC/ JAY Owner's Address 5308 ROCK RIDGE	02 W ALBAN PAGE	Y, IN 47150, NEW AI SVILLE, KY 40241-	LBAN	Telephone Number  Est 812-944-2700  Own 617-519-3355  Purpose  X Routine  Follow-up  Complaint	Date of Inspection 07/09/2020 Follow Up	ID#  Released 07/19/2020	
Person in Charge LORA MURPHY  Responsible Person's Email LORAMURPHY 132@GMAIL.COM  Certified Food Handler LORA MURPHY  CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"				Pre-Operational Temporary HACCP Other (list)	Menu Type 1 2 _X 3 4 5		
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRAIVE COLUMN MARKED AS "R"							
Section #	C NC	R Narrative	R Narrative To Be Corrected				
291	Х	tablets.					
297	Х		Observed bulk ice machine door to have build-up on interior.  TODAY				
297 389	Bulb was unable to be unscrewed from machine.						
422	Х	Observed person	nal item left on wrapping	station.	CORRE	CTED	
Summary of Violation	ons (	C _ 0 _ NC					
Received by (name a	nd title prin	nted):	Inspected by (name and title	nspected by (name and title printed):			
LORA MURPHY			A.J. Ingram CHIEF FOOD SPECIALIST				
Received by (signatur	re):		Inspected by (signature):				
cc:			cc:	-	cc:		